

Information

Registration

The leagues will be filled on a first come, first serve policy. These leagues will fill up quickly, so sign up early to ensure your team has a spot in the league. Due to field and time restraints, teams will not be able to be entered into the league after the maximum registration has been reached.

Call 314-290-8519 to register by phone with a credit card or complete the form attached and mail it with payment to The Center of Clayton.

If 50% of your team lives or works in the city of Clayton, your team is eligible for the resident rate.

Schedules & Rosters

Schedules, rosters and rules will be emailed to the captain. The captain is responsible for distributing information to his/her team. Rosters must be turned in before the first game. Teams will not be able to play unless the roster is turned in.

The roster must be signed by every player!

Refund Policy

100% Refund - if request is made before the registration deadline

50% Refund - if request is made after the registration deadline, unless the team requesting the refund brings the league under the minimum number of teams required

0% Refund - If request is made after games begin

All refunds are subject to a \$5 service fee

Park Policy

Glass bottles and smoking are not allowed in Shaw Park

For more information please visit

www.claytonmo.gov/adultsports

or contact

Tim Hohenstein at
314-290-8519 or email at
thohenstein@claytonmo.gov

The Center of Clayton
50 Gay Ave.
Clayton, MO 63105

Adult Softball

INFORMATION



Coed Double
Header 2013



Coed Double Header Softball Leagues

Coed Double Header Softball Info

This league consists of a 6 week regular season (12 games) followed by a single elimination tournament.

Tuesday Nights

Begins: June 11

Game Times: 6:00 & 7:00pm or
8:00 & 9:00pm

Code: #15194

Location: Shaw Park Fields #5 and #6

Resident Team - \$525
Non-Resident Team - \$575



Deadline May 31

2013 CLAYTON PARKS AND RECREATION SPRING/SUMMER ADULT SOFTBALL LEAGUES

(Please complete form in its entirety)

Team name _____

Captain's name _____

Address _____

City _____

State _____

Zip Code _____

Home phone _____

Work phone _____

Code # _____

E-mail address _____

My family and I hereby waive and release the City of Clayton and its representatives from claims for damages and/or injuries incurred while participating in or as a spectator at a City of Clayton sponsored activity. I have read and understand the registration and refund policies. REGISTRATION IS INVALID WITHOUT SIGNATURE. I also agree, as a participant or as a parent of a minor participant, to grant full permission to the City of Clayton to use my name, photograph, videotape or recordings for any publicity promotion purposes without obligation or liability to me or my family.

SIGNATURE _____